



Childhood Lead Poisoning Prevention Program Lead Screening Questionnaire

Name of patient: _____ Date: _____

Age of child: _____ Health Care Provider: _____

Anticipatory guidance regarding lead hazard identification and risk reduction measures should be a routine part of an ongoing educational approach for pregnant women, children and their families. The goal of lead screening is to identify children who may have been exposed to lead, provide interventions and reduce the risk of exposure. All children should be assessed for risk of lead poisoning by administration of the following questionnaire. **This questionnaire should be administered at 1 and 2 years of age or between 3 and 5 years of age if not previously screened.** If the answer to any of these questions is “Yes” or “Don’t know” a blood lead test should be performed. Follow up questions may be needed to clarify responses.

Please circle the answers to the following questions:

Does your child live in or regularly visit a home, child care or other building built before 1950?	Yes Don't Know	No
During the past 6 months has your child lived in or regularly visited a home, child care or other building built before 1980 with recent or ongoing painting, repair, remodeling or damage?	Yes Don't Know	No
Does your child have a brother, sister, other relative, housemate or playmate with lead poisoning?	Yes Don't Know	No
Does your child spend time with an adult that has a job or hobby where they may work with lead (such as painting, remodeling, auto radiators, batteries, auto repair, soldering, making sinkers, bullets, stained glass, pottery, going to shooting ranges, hunting or fishing)?	Yes Don't Know	No
Do you have pottery or ceramics made in other countries or lead crystal or pewter that are used for cooking, storing or serving food or drink?	Yes Don't Know	No
Has your child ever used any traditional, imported or home remedies or cosmetics such as Azarcon, Alarcon, Greta, Rueda, Pay-loo-ah, or Kohl?	Yes Don't Know	No
Has your child been adopted from, lived in or visited a foreign country in the last 6 months?	Yes Don't Know	No
Do you have concerns about your child's development? Concern(s): _____	Yes	No

Blood lead testing should also be considered as part of a diagnostic work-up of any child regardless of age with the following symptoms:

- **Behavioral problems:** aggression, hyperactivity, attention deficit, school problems, learning disabilities, excessive mouthing or pica behavior and other behavior disorders.
- **Developmental problems:** growth, speech and language delays and/or hearing loss.
- **Symptoms or signs consistent with lead poisoning:** irritability, headaches, vomiting, seizures or other neurological symptoms, anemia, loss of appetite, abdominal pain and cramping or constipation.
- **Ingestion of foreign body**